United States Bankruptcy Court Southern District of Illinois, Effingham Division

IN RE:		Case No
Slifer, Amy R.		Chapter 7
	Debtor(s)	•
	VERIFICATION OF CREDIT	OR MATRIX
The above named Debtor(s) hereby and that it corresponds to the credite	•	ors is true and correct to the best of my/our knowledge
Date: December 2, 2016	/s/ Amy R. Slifer Debtor	
	Joint Debtor	

Atlantic Credit and Finance Inc. PO Box 12966 Roanoke, VA 24030-2966

Capital One Bank USA NA PO Box 6492 Carol Stream, IL 60197-6492

Central Illinois Radiological Associates PO Box 3184
Indianapolis, IN 46206-3184

Chase Home Finance PO Box 9001871 Louisville, KY 40290-1871

Chex Systems Inc Attn: Consumer Relations 7805 Hudson Rd Ste 100 Woodbury, MN 55125-1595

Citibank NA
Attn: Bankruptcy Dept.
PO Box 6077
Sioux Falls, SD 57117-6077

Comenity Bank
Bankruptcy Dept.
PO Box 182125
Columbus, OH 43218-2125

Effingham Surgery Center c/o Account Resolution Corporation PO Box 3860 Chesterfield, MO 63006-3860

Equifax Consumer Relations PO Box 105873 Atlanta, GA 30348-5873

Experian Consumer Relations PO Box 2002 Allen, TX 75013-2002

Greenville Regional Hospital 200 Health Care Dr Greenville, IL 62246-1154

HSHS Holy Family Hospital Inc c/o Consumer Collection Mngmt Inc PO Box 1839 Maryland Heights, MO 63043-6839

Internal Revenue Service Centralized Insolvency Operations PO Box 7346 Philadelphia, PA 19101-7346

Kohls PO Box 2983 Milwaukee, WI 53201-2983 Midland Funding, LLC 8875 Aero Dr Ste 200 San Diego, CA 92123-2255

Midstate Collection Solutions, Inc. PO Box 3292 Champaign, IL 61826-3292

Sarah Bush Lincoln Health Center PO Box 3927 Springfield, IL 62708-3927

Sarah Bush Lincoln Physician Billing PO Box 3406 Springfield, IL 62708-3406

St Anthony's Memorial Hospital PO Box 4236 Carol Stream, IL 60197-4236

State Collection Service Inc PO Box 6250 Madison, WI 53716-0250

Synchrony Bank PO Box 960061 Orlando, FL 32896-0061 Trans Union Consumer Relations PO Box 1000 Chester, PA 19016-1000

US Bank Southern Illinois Indirect PO Box 790179 Saint Louis, MO 63179-0179 Case 16-60473-lkg Doc 1 Filed 12/02/16 Page 6 of 54

B201B (Form 201B) (12/09)

United States Bankruptcy Court Southern District of Illinois, Effingham Division

IN RE:		Case No
Slifer, Amy R.		Chapter 7
	Debtor(s)	

	ON OF NOTICE TO CONSUMER DEBTO 342(b) OF THE BANKRUPTCY CODE	OR(S)
Certificate of	[Non-Attorney] Bankruptcy Petition Prepar	rer
I, the [non-attorney] bankruptcy petition prepared notice, as required by § 342(b) of the Bankruptcy	signing the debtor's petition, hereby certify that I code.	delivered to the debtor the attached
Printed Name and title, if any, of Bankruptcy Pet Address:	petition the Soci principa the bank	decurity number (If the bankruptcy preparer is not an individual, state al Security number of the officer, al, responsible person, or partner of cruptcy petition preparer.) ed by 11 U.S.C. § 110.)
XSignature of Bankruptcy Petition Preparer of offi partner whose Social Security number is provide	cer, principal, responsible person, or	od by 11 o.b.e. (110.)
	Certificate of the Debtor	
I (We), the debtor(s), affirm that I (we) have rece	ived and read the attached notice, as required by §	342(b) of the Bankruptcy Code.
Slifer, Amy R.	X /s/ Amy R. Slifer	12/02/2016
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X	
	Signature of Joint Debtor (if	fany) Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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Fill in this informa	ition to identify your case:					
Debtor 1	Amy R. Slifer					
	First Name Middle Nam	ne Last Name				
Debtor 2 (Spouse if, filing)	First Name Middle Nam	ne Last Name				
United States Bank	cruptcy Court for the: SOUTHERN	DISTRICT OF ILLINOIS, EFFINGHAM DIVISION				
	adploy obdition the.	DIGITALS OF ILLEASON, LITTURE WAY DIVISION				
Case number			☐ Check if this is an			
			amended filing			
Official For	m 108					
Statemen	t of Intention for Inc	dividuals Filing Under Chapt	er 7			
			12/10			
	dual filing under chapter 7, you mus	t fill out this form if:				
_	claims secured by your property, or					
	d personal property and the lease ha form with the court within 30 days af	s not expired. ter you file your bankruptcy petition or by the date set	for the meeting of creditors.			
whicheve	er is earlier, unless the court extends	s the time for cause. You must also send copies to the	creditors and lessors you list on			
the form						
	ole are filing together in a joint case, the form.	both are equally responsible for supplying correct info	ormation. Both debtors must sign			
Be as complete and	d accurate as possible. If more space	e is needed, attach a separate sheet to this form. On the	e top of any additional pages,			
	r name and case number (if known).		,, ,			
Part 1: List You	r Creditors Who Have Secured Clain	ns				
1 For any creditors	s that you listed in Part 1 of Schedul	e D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the			
information belo	w.		, , , , , , , , , , , , , , , , , , ,			
identity the cred	itor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?			
Creditor's Ch	ase Home Finance	☐ Surrender the property.	□No			
name:		☐ Retain the property and redeem it.	_			
Description of	9662 E Bloomfield Ct.	Retain the property and enter into a <i>Reaffirmation</i>	■ Yes			
·	Effingham, IL 62401-8006	Agreement. ☐ Retain the property and [explain]:				
securing debt:			_			
Creditor's US	Bank Southern Illinois Indirect	☐ Surrender the property.	□ No			
name:		Retain the property and redeem it.	■ ∨			
Description of	2012 Ford Fusion	Retain the property and enter into a Reaffirmation Agreement.	Yes			
property		Retain the property and [explain]:				
securing debt:			_			
Part 2: List You	r Unexpired Personal Property Leas	es				
For any unexpired	personal property lease that you list	ted in Schedule G: Executory Contracts and Unexpired				
		nexpired leases are leases that are still in effect; the lea ne trustee does not assume it. 11 U.S.C. § 365(p)(2).	se perioù nas not yet ended. 100			
Describe your unexpired personal property leases Will the lease be assumed?						
_	mpiled personal property leades		The title loade be addulted:			
Lessor's name:						

Official Form 108

Debtor 1 Slifer, Amy R.	1	Case number (if kr	nown)
			□ No
Description of leased			
Property:			☐ Yes
Lessor's name:			□ No
Description of leased Property:			☐ Yes
Lessor's name:			□ No
Description of leased Property:			☐ Yes
Lessor's name:			□ No
Description of leased Property:			☐ Yes
Lessor's name: Description of leased			□ No
Property:			☐ Yes
Lessor's name:			□ No
Description of leased Property:			☐ Yes
Lessor's name:			□ No
Description of leased Property:			☐ Yes
Part 3: Sign Below			
Under penalty of perjury, I o	leclare that I have indicated	I my intention about any property of my estate that	secures a debt and any personal
property that is subject to a	n unexpired lease.		
X /s/ Amy R. Slifer		X	
Amy R. Slifer Signature of Debtor 1		Signature of Debtor 2	
Date December	2, 2016	Date	

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF ILLINOIS, EFFINGHAM DIVISION		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's	Amy First name R.	First name
	license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Slifer Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8980	

Debtor 1 Slifer, Amy R. Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	OCC2 E Bloomfield Ct	If Debtor 2 lives at a different address:			
		9662 E Bloomfield Ct Effingham, IL 62401-8006				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Effingham	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
bankruptcy		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Deb	otor 1 Slifer, Amy R.		Case number (if known)			er (if known)		
Par	Tell the Court About	Your Bankr	uptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	■ Chapt	ter 7					
		☐ Chapt	ter 11					
		☐ Chapt	ter 12					
		☐ Chapt	ter 13					
8.	How you will pay the fee	abo If yo pre	out how yo our attorned printed ac	u may pay. Typically, if you are pa ey is submitting your payment on y ddress.	ying the fee yourself, you may your behalf, your attorney may	k's office in your local court for more details pay with cash, cashier's check, or money order. pay with a credit card or check with a tach the Application for Individuals to Pay The		
		Filin I re	ng Fee in a equest that required to r family si	Installments (Official Form 103A). It my fee be waived (You may re o, waive your fee, and may do so o	quest this option only if you ar only if your income is less thar ee in installments). If you choo	e filing for Chapter 7. By law, a judge may, but is a 150% of the official poverty line that applies to use this option, you must fill out the <i>Application</i>		
9.	Have you filed for bankruptcy within the last	■ No.						
	8 years?	☐ Yes.						
			District		When	Case number		
			District		When	Case number		
			District		When	_ Case number		
10.	Are any bankruptcy cases pending or being filed by	■ No						
	a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor			Relationship to you		
			District	\	When	Case number, if known		
			Debtor			Relationship to you		
			District	\	When	Case number, if known		
11.	Do you rent your residence?	■ No.	Go to	ine 12.				
		☐ Yes.	Has yo	our landlord obtained an eviction ju	idgment against you and do yo	ou want to stay in your residence?		
				No. Go to line 12.				
				Yes. Fill out <i>Initial Statement Ab</i> bankruptcy petition.	out an Eviction Judgment Aga	inst You (Form 101A) and file it with this		

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Deb	otor 1 Slifer, Amy R.			Case number (if known)		
Par	Report About Any Bus	sinesses `	You Own as a Sole Prop	rietor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.			
	business:	☐ Yes.	Name and location of	f business		
	A sole proprietorship is a					
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if			
	If you have more than one sole proprietorship, use a separate sheet and attach it		Number, Street, City,	, State & ZIP Code		
	to this petition.		Check the appropriat	e box to describe your business:		
☐ Health Care Business (as defined in 11 U.S.C. § 101(27A			Business (as defined in 11 U.S.C. § 101(27A))			
			☐ Single Asset	Real Estate (as defined in 11 U.S.C. § 101(51B))		
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))		
			☐ Commodity B	roker (as defined in 11 U.S.C. § 101(6))		
			☐ None of the a	bove		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small	deadlines operation	u are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set approdilines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, stateme ations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the proce C. 1116(1)(B). I am not filing under Chapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.			
		☐ Yes.	I am filing under Cha	pter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Any	· Hazardous Property or	Any Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or		What is the hazard?			
	safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?			
	•			Number, Street, City, State & Zip Code		

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Debtor 1 Slifer, Amy R. Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or makinç rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Slifer, Amy R.	er, Amy R. Case number (if known)			(if known)				
Par	6: Answer These Questi	ons for Re	porting Purposes						
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
			☐ No. Go to line 16b.						
			■ Yes. Go to line 17.						
			Are your debts primarily busine for a business or investment or the						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you owe th	at are not consume	er debts or business de	ebts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. G	Go to line 18.					
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?						
	administrative expenses are paid that funds will be		■ No						
	available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do	■ 1-49		1 ,000-5,000)	2 5,001-50,000			
	you estimate that you owe?	□ 50-99		5001-10,000		50,001-100,000			
		□ 100-199 □ 200-999		□ 10,001-25,000		☐ More than100,000			
19.	How much do you	□ \$0 - \$5	50,000	□ \$1,000,001 - \$10 million		□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?	□ \$50,001 - \$100,000		☐ \$10,000,001 - \$50 million		\$1,000,000,001 - \$10 billion			
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
		\$500,0	U1 - \$1 million	— \$100,000,00	91 - \$300 million	I More than 450 billion			
20.	How much do you	□ \$0 - \$5		□ \$1,000,001		□ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		01 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million		\$1,000,000,001 - \$10 billion			
			01 - \$500,000 01 - \$1 million	□ \$100,000,001 - \$100 million		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
		— \$500,0							
Par	7: Sign Below								
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.							
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.							
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
		I request	relief in accordance with the chap	ter of title 11, Unite	ed States Code, speci	fied in this petition.			
			result in fines up to \$250,000, or in			operty by fraud in connection with a bankruptcy 8 U.S.C. §§ 152, 1341, 1519, and 3571.			
		Amy R.			Signature of Debtor	2			
		Executed	On December 2, 2016 MM / DD / YYYY		Executed on MM	/ DD / YYYY			

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Debtor 1 Slifer, Amy R.		Case number (if known)		
<u></u>				
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this petition, declar Chapter 7, 11, 12, or 13 of title 11, United States Code, and person is eligible. I also certify that I have delivered to the de	have explained	the relief available under each chapter for which the	
If you are not represented by an attorney, you do not need to file this page.	which § 707(b)(4)(D) applies, certify that I have no knowledge petition is incorrect.	e after an inqui	iry that the information in the schedules filed with the	
	/s/ Roy Dent	Date	December 2, 2016	
	Signature of Attorney for Debtor		MM / DD / YYYY	
	Roy Dent			
	Printed name			
	Orr Law, LLC			
	Firm name			
	215 N 4th St			
	Effingham, IL 62401-3461			
	Number, Street, City, State & ZIP Code			
	Contact phone	Email address	roy.jackson.dent@gmail.com	
	6255835			
	Bar number & State			

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		10 00470	g	DOC 1	1 1100 12/02	., 10	ago ±0	0.0.		
Fill in this inforn	nation to identify you	r case and thi	s filing	:						
Debtor 1	Amy R. Slifer									
Dobtor 2	First Name	Middle	Name		Last Name					
Debtor 2 (Spouse, if filing)	First Name	Middle	Name		Last Name					
United States Bar	nkruptcy Court for the:	SOUTHER	N DIST	RICT OF ILLII	NOIS, EFFINGHA	AM DIVISIO	N			
Case number _					_				☐ Check if th amended f	
Schedul	rm 106A/B e A/B: Pro	be items. List a							ne category where	1 2/15 re you
think it fits best. Be information. If more Answer every ques	e as complete and accur e space is needed, attac	ate as possible h a separate sh	e. If two in eet to the	married people nis form. On the	e are filing togethe e top of any additio	r, both are e onal pages,	qually respo	nsible for sup	plying correct	-
□ No. Go to Part ■ Yes. Where is										
	oomfield Ct if available, or other description	on .	Duplex or multi-unit building the a			the amount	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.			
Effingham City	n IL 62 State	2401-8006 ZIP Code	U U Who	Land Investment pr Timeshare Other	operty t in the property?	Check one	Describe to	perty? 65,000.00 he nature of yoe simple, tende), if known.	Current value o portion you own \$165,0 our ownership int ancy by the entire	rn? 000.00 terest
Effingham County	1			Debtor 1 and At least one of	Debtor 2 only of the debtors and al		(see ins	c if this is com	munity property	
					cres consists age. Purchase				en, living	
	ar value of the portion ached for Part 1. Write							ages	\$165,000	0.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1	Slifer, Amy R.	Cas	se number (if known)	
3. Cars, vans	, trucks, tractors, sport utility v	ehicles, motorcycles		
□ No		•		
_				
Yes				
2.1 Make	Ford	Who has an interest in the property? Cheek are	Do not deduct secured of	laims or exemptions. Put
3.1 Make:	Fusion	Who has an interest in the property? Check one	the amount of any secur	ed claims on Schedule D:
Model: Year:	2012	■ Debtor 1 only □ Debtor 2 only		ims Secured by Property.
	imate mileage: 76000	Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	nformation:	☐ At least one of the debtors and another	,	, ,
Fair c	ondition.	_	CC 405 00	#C 405 00
		☐ Check if this is community property (see instructions)	\$6,425.00	\$6,425.00
		(ccc includione)		
■ No □ Yes	odais, italiets, motors, personal wa	atercraft, fishing vessels, snowmobiles, motorcycle acce	SSUIES	
		wn for all of your entries from Part 2, including any umber here		\$6,425.00
_				
	ibe Your Personal and Household	Items hterest in any of the following items?		Current value of the
		nerest in any of the following items?		portion you own? Do not deduct secured claims or exemptions.
Examples: ☐ No	I goods and furnishings Major appliances, furniture, linens	, china, kitchenware		
Yes. De		and the Proceedings of the Process o		
	dining room s cookware, dis	ods including 4 bedroom sets, living room set, 3 bookcases, home appliances, bedding, hes, and flatware. Debtor estimates that a reold goods 'as-is' would bring approximately	etail sale	\$2,000.00
7. Electronics Examples:		eo, stereo, and digital equipment; computers, printers, somedia players, games	canners; music collections;	electronic devices
Yes. De				
	cellular teleph	est in 4 televisions, 2 DVD players, 100 DVD: iones, 1 computer, 1 tablet, and 2 game syst I retail value of the electronics 'as-is' would l	ems.	\$500.00
		prints, or other artwork; books, pictures, or other art objubles	ects; stamp, coin, or baseb	all card collections; other
■ No □ Yes. De	escribe			
	instruments	nd other hobby equipment; bicycles, pool tables, golf club	bs, skis; canoes and kayak	s; carpentry tools; musical

Official Form 106A/B Schedule A/B: Property page 2

Del	btor 1	Slifer, Amy I	Case number (if known)	
į	■ No	oles: Pistols, rifles	, shotguns, ammunition, and related equipment	
		Describe		
_	Clothes Examp ☐ No		hes, furs, leather coats, designer wear, shoes, accessories	
ı	Yes.	Describe		
			Debtor's interest in approximately 500 articles of clothing. Debtor estimates that the retail sale of used clothing if it were purchased at a used clothing facility such as Goodwill would be \$500.	\$500.00
[□ No É		elry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold,	silver
			Debtor's interest in 30 pairs earrings, 10 rings, 20 necklaces of costume jewelry. This jewelry was not purchased as an investment and is intended as everyday wearing apparel of the	
			debtor. The estimated retail value is \$200.	\$200.00
[<i>Examp</i> □ No □	rm animals bles: Dogs, cats, b	irds, horses	
			1 Dog	\$0.00
	Any ot h □ No	ner personal and	household items you did not already list, including any health aids you did not list	
ı	Yes.	Give specific info		\$400.00
			Books: 100 books with an average value of \$1 is \$100.	\$100.00
			Push Mower (inoperable)	\$10.00
			Hand Tools	\$10.00
15.			of all of your entries from Part 3, including any entries for pages you have attached for ber here	\$3,320.00
Par	t 4: Des	scribe Your Financ	cial Assets	
Do			gal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
ı	■ No		ave in your wallet, in your home, in a safe deposit box, and on hand when you file your petition	
17.		ts of money		
		oles: Checking, sa	vings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage hou If you have multiple accounts with the same institution, list each.	ses, and other similar
_	_		Institution name:	

Official Form 106A/B Schedule A/B: Property page 3

Debt	tor 1	Slifer, Amy R			Case number (if known)	
			17.1.	Checking Account	Midland States Bank	\$30.00
			17.2.	Checking Account	Dieterich Bank (Money deposited in this account belongs to joint account holder.)	\$0.00
		mutual funds, or bles: Bond funds, in			e firms, money market accounts	
_	No Yes			Institution or issuer name	:	
		blicly traded stoc	k and i	nterests in incorporated	and unincorporated businesses, including an interest in an LL	.C, partnership, and
	No	0: '': '				
	I Yes.	Give specific infor		about them me of entity:	% of ownership:	
	Negoti	<i>able instrument</i> s in	clude pe	ersonal checks, cashiers' c	and non-negotiable instruments checks, promissory notes, and money orders. o someone by signing or delivering them.	
		Give specific inforn		bout them uer name:		
		nent or pension a oles: Interests in IR			, thrift savings accounts, or other pension or profit-sharing plans	
_	_	List each account s	Туре	ely. of account: k) or Similar Plan	Institution name: Midland States Bank	\$0.00
ì	Your sl <i>Examp</i>		deposits	you have made so that you	u may continue service or use from a company utilities (electric, gas, water), telecommunications companies, or other	rs
	No Yes.				Institution name or individual:	
			a period	ic payment of money to you	u, either for life or for a number of years)	
	No Yes	lssu	ıer nam	e and description.		
26	6 U.S.0	s in an education C. §§ 530(b)(1), 52			d ABLE program, or under a qualified state tuition program.	
	No Yes	Inst	itution r	name and description. Sepa	arately file the records of any interests.11 U.S.C. § 521(c):	
_		equitable or futu	re inter	ests in property (other th	han anything listed in line 1), and rights or powers exercisable	for your benefit
	No Yes.	Give specific infor	mation	about them		
				s, trade secrets, and others, websites, proceeds from	er intellectual property n royalties and licensing agreements	
	l Yes.	Give specific infor	mation	about them		
				general intangibles usive licenses, cooperative	association holdings, liquor licenses, professional licenses	

Official Form 106A/B Schedule A/B: Property page 4

 $\hfill\square$ Yes. Give specific information about them...

Debtor	Slifer, Amy R.		Case number (if known)	
Manay	r an muamantir assed to seas?			Commont value of the
woney	y or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
Y	Yes. Give specific information about	them, including whether you already filed the returns and the	ne tax years	
		Debtor's interest in 2016 income tax refund in the estimated amount of \$6,082. (Note: Debtor believes that \$0.00 of that refund is earned income credit and/or additional child tax credit.)	Federal	\$6,082.00
Ex ■ N	•	nony, spousal support, child support, maintenance, divord	e settlement, property set	tlement
	unpaid loans you made to	surance payments, disability benefits, sick pay, vacation pa someone else	ıy, workers' compensation	, Social Security benefits;
ΠY	es. Give specific information			
Ex ■ N		urance; health savings account (HSA); credit, homeowner'	s, or renter's insurance	
		ny name: Beneficial	ry:	Surrender or refund value:
If y die ■ N	ed.	you from someone who has died st, expect proceeds from a life insurance policy, or are curr	ently entitled to receive pro	
	kamples: Accidents, employment dis	r or not you have filed a lawsuit or made a demand for sputes, insurance claims, or rights to sue	r payment	
-	Yes. Describe each claim			
	No	laims of every nature, including counterclaims of the	debtor and rights to set	off claims
ШΥ	es. Describe each claim			
	•	eady list		
ЦΥ	es. Give specific information		_	
		entries from Part 4, including any entries for pages yo		\$6,112.00
Part 5:	Describe Any Business-Related Pro	perty You Own or Have an Interest In. List any real estate in	Part 1.	
37. Do y	you own or have any legal or equitabl	e interest in any business-related property?		
_ `	o. Go to Part 6.			

Official Form 106A/B Schedule A/B: Property page 5

 \square Yes. Go to line 38.

Debt	or 1 <u>SI</u>	ifer, Amy R.		Case number (if known)	
Part		e Any Farm- and Commercial Fishing-Related Property You vn or have an interest in farmland, list it in Part 1.	Own or Have an Interes	t In.	
46. D	o you ow	n or have any legal or equitable interest in any farm- o	or commercial fishing	-related property?	
	No. Go to	Part 7.			
	☐ Yes. Go	to line 47.			
Part	7: De	scribe All Property You Own or Have an Interest in That You	Did Not List Above		
	Examples: No Yes. Give	e other property of any kind you did not already list? Season tickets, country club membership specific information	t number bero	Γ	\$0.00
Part		the Totals of Each Part of this Form	t number nere		\$0.00
55	Part 1: To	tal real estate, line 2			\$165,000.00
		tal vehicles, line 5	\$6,425.00		Ψ103,000.00
		tal personal and household items, line 15	\$3,320.00		
		tal financial assets. line 36	\$6,112.00		
		tal business-related property, line 45	\$0.00		
		tal farm- and fishing-related property, line 52	\$0.00		
		tal other property not listed, line 54 +	\$0.00		
62.	Total pers	sonal property. Add lines 56 through 61	\$15,857.00	Copy personal property total	sl \$15,857.00

\$180,857.00

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

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		00.00 =				
Fill	in this inform	ation to identify your o	case:			
Del	btor 1	Amy R. Slifer]
		First Name	Middle Name	L	ast Name	}
-	btor 2 ouse if, filing)	First Name	Middle Name	L	ast Name	
Uni	ited States Bar	kruptcy Court for the:	SOUTHERN DISTRICT OF	ILLING	OIS, EFFINGHAM DIVISION	
	se number					☐ Check if this is an amended filing
Of	ficial Fo	rm 106C				
			pperty You Cla	im	as Exempt	4/16
prop	perty you listed and attach to th	on Schedule A/B: Prope	rty (Official Form 106A/B) as yo	our sou		plying correct information. Using the sexempt. If more space is needed, fill a, write your name and case number (if
spec app func to a	cific dollar am licable statuto ds—may be ui	ount as exempt. Alterr bry limit. Some exempti nlimited in dollar amou llar amount and the val	natively, you may claim the fu ions—such as those for healt nt. However, if you claim an o	ıll fair th aid: exemp	s, rights to receive certain benefits	g exempted up to the amount of any s, and tax-exempt retirement under a law that limits the exemption
Par	rt 1: Identif	y the Property You Cla	im as Exempt			
			aiming? Check one only, even	if vou	r snouse is filing with you	
١.	_	, ,	,	•	, ,	
	■ You are cia	iming state and federal n	onbankruptcy exemptions. 11	U.S.C	. § 522(D)(3)	
	☐ You are cla	iming federal exemptions	s. 11 U.S.C. § 522(b)(2)			
2.	For any prop	erty you list on Schedu	ule A/B that you claim as exe	mpt, f	ill in the information below.	
		on of the property and line hat lists this property	e on Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	9662 E Bloo	omfield Ct	\$165,000.00		\$15,000.00	735 ILCS 5/12-901
	Effingham I County: Ef Line from Sch	_			100% of fair market value, up to any applicable statutory limit	
	Ford		\$6,425.00		\$2,400.00	735 ILCS 5/12-1001(c)
	Fusion 2012 76000 Line from <i>Sch</i>	edule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	Ford		\$6,425.00		\$485.36	735 ILCS 5/12-1001(b)
	Fusion 2012 76000				100% of fair market value, up to any applicable statutory limit	

Line from Schedule A/B: 3.1

D. () ()	0			0
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Household goods including 4	\$2,000.00		\$2,000.00	735 ILCS 5/12-1001(b)
bedroom sets, living room set, dining room set, 3 bookcases, home appliances, bedding, cookware, dishes, and flatware. Debtor estimates that a retail sale of the household goods 'as-is' would bring approximately \$2,000. Line from Schedule A/B. 6.1			100% of fair market value, up to any applicable statutory limit	
Debtor's interest in 4 televisions, 2 DVD players, 100 DVDs, 4 cellular	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
telephones, 1 computer, 1 tablet, and 2 game systems. The estimated retail value of the electronics 'as-is' would be \$500. Line from Schedule A/B. 7.1			100% of fair market value, up to any applicable statutory limit	
Debtor's interest in approximately 500 articles of clothing. Debtor	\$500.00		\$500.00	735 ILCS 5/12-1001(a)
estimates that the retail sale of used clothing if it were purchased at a used clothing facility such as Goodwill would be \$500. Line from Schedule A/B 11.1			100% of fair market value, up to any applicable statutory limit	
Debtor's interest in 30 pairs earrings, 10 rings, 20 necklaces of	\$200.00		\$200.00	735 ILCS 5/12-1001(a)
costume jewelry. This jewelry was not purchased as an investment and is intended as everyday wearing apparel of the debtor. The estimated retail value is \$200. Line from Schedule A/B 12.1			100% of fair market value, up to any applicable statutory limit	
Push Mower (inoperable) Line from Schedule A/B 14.2	\$10.00		\$10.00	735 ILCS 5/12-1001(b)
Ento Hoth Goricdate A/D. 17.2			100% of fair market value, up to any applicable statutory limit	
Hand Tools Line from Schedule A/B. 14.3	\$10.00		\$10.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
Midland States Bank Line from Schedule A/B: 17.1	\$30.00		\$30.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
Midland States Bank	\$0.00			735 ILCS 5/12-1006
Line from Schedule A/B. 21.1			100% of fair market value, up to any applicable statutory limit	

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption					
		Copy the value from Schedule A/B	Check only one box for each exemption.						
	Debtor's interest in 2016 income tax refund in the estimated amount of	\$6,082.00	\$964.64	735 ILCS 5/12-1001(b)					
	\$6,082. (Note: Debtor believes that \$0.00 of that refund is earned income credit and/or additional child tax credit.) Line from Schedule A/B. 28.1		□ 100% of fair market value, up to any applicable statutory limit						
3.	 Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No 								
	Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?								
	□ No								
	☐ Yes								

Fill in this information t	to identity you	r case:			
	y R. Slifer	Middle Name Last Name		.	
Debtor 2	INAITIE	Midule Name Last Name			
	Name	Middle Name Last Name			
United States Bankruptc	v Court for the	SOUTHERN DISTRICT OF ILLINOIS, EFI	FINGHAM DIVISION		
Omitod Otatoo Barmirapto	y Court for tho.				
Case number (if known)				- Charle	if their in one
(II KHOWH)					if this is an led filing
					ica iliing
Official Form 106	<u>SD</u>				
Schedule D: C	Creditors	Who Have Claims Secur	ed by Propert	У	12/15
		f two married people are filing together, both are t, number the entries, and attach it to this form. O			
1. Do any creditors have cla	aims secured by	your property?			
☐ No. Check this bo	x and submit th	is form to the court with your other schedules. Y	ou have nothing else to re	port on this form.	
Yes. Fill in all of the	ne information be	elow.			
Part 1: List All Secur	red Claims				
2. List all secured claims.	If a creditor has n	nore than one secured claim, list the creditor separate	ely Column A	Column B	Column C
		a particular claim, list the other creditors in Part 2. As cal order according to the creditor 's name.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
		-	value of collateral.	claim	If any
2.1 Chase Home Fi	nance	Describe the property that secures the claim:	\$162,553.85	\$165,000.00	\$0.00
Creditor's Name		9662 E Bloomfield Ct, Effingham, IL 62401-8006			
		House on 1.5 acres consists of 3			
		bedrooms, 2 baths, kitchen, living			
		room, and garage. Purchased in			
PO Box 900187	1	2010 for \$165,000. As of the date you file, the claim is: Check all that	J		
Louisville, KY		apply.			
40290-1871		Contingent			
Number, Street, City, Sta	ate & ∠ip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Che	eck one.	Nature of lien. Check all that apply.			
■ Debtor 1 only		☐ An agreement you made (such as mortgage or	secured		
Debtor 2 only		car loan)			
Debtor 1 and Debtor 2 o	nly	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debto	ors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim rela	ites to a	Other (including a right to offset) Mortgag	е		
Date debt was incurred		Last 4 digits of account number 059	3		
			-		
2.2 US Bank South	ern	Describe the property that secures the claim:	\$3,539.64	\$6,425.00	\$0.00
Creditor's Name		2012 Ford Fusion]		<u> </u>
		Fair condition.			
PO Box 790179		As of the date you file, the claim is: Check all that	J		
Saint Louis, MC)	apply.			
63179-0179		Contingent			
Number, Street, City, Sta	ne a zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Che	eck one.	Nature of lien. Check all that apply.			
■ Debtor 1 only		☐ An agreement you made (such as mortgage or	secured		
Debtor 2 only		car loan)			
Debtor 1 and Debtor 2 o	nly	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debto		☐ Judgment lien from a lawsuit			
Check if this claim rela	ites to a	Other (including a right to offset)			
Official Form 106D		Schedule D: Creditors Who Have Claims Se	e Money Security		<u>page 1</u> of 2

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Debtor 1 Amy R. Slifer					Case number (if know)	
	First Name	Middle Name	Last Name			
Date debt was incurred Last 4 digits of account number			2378			
Add the do	ollar value of your entrie	es in Column A or	n this page. Write that number here	e:	\$166,093.49	
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:				\$166,093.49		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	U.S. data takansa								
		ation to identify your	case:				1		
De	ebtor 1	Amy R. Slifer First Name	Middle	e Name	Last Name				
De	ebtor 2	First Name	ivildali	e name	Last Name		1		
1 1	ouse if, filing)	First Name	Middle	e Name	Last Name				
Ur	nited States Ban	kruptcy Court for the:	SOUTHE	RN DISTRICT OF	FILLINOIS, EFFING	SHAM DIVISION			
Ca	ase number								
	known)						☐ Chec	k if this is an	
							amer	ided filing	
Of	ficial Form	106E/F							
Sc	chedule E/	F: Creditors W	/ho Hav	e Unsecure	ed Claims			12/15	
any Sch D: 0 the cas	executory contractured and the contracture of the c	acts or unexpired leases ory Contracts and Unexp ave Claims Secured by P ge to this page. If you ha wn).	that could re pired Leases (roperty. If mo ve no informa	esult in a claim. Als (Official Form 106G ore space is needed ation to report in a	so list executory con i). Do not include any I, copy the Part you i	t 2 for creditors with NON tracts on Schedule A/B: F y creditors with partially s need, fill it out, number th Part. On the top of any ac	Property (Official For ecured claims that a e entries in the box	rm 106A/B) an are listed in So es on the left.	d on chedule Attach
		of Your PRIORITY Un rs have priority unsecure							
••	No. Go to Pa		a ciaiiis aga	mst you.					
	Yes.								
2.	identify what typ possible, list the 1. If more than o	e of claim it is. If a claim ha	as both priority er according to lar claim, list t	y and nonpriority am o the creditor 's nam he other creditors in	ounts, list that claim he e. If you have more th Part 3.	im, list the creditor separate ere and show both priority a an two priority unsecured c et.) Total claim	and nonpriority amour	nts. As much as	s of Part
	–						amount	amount	
2.1		Revenue Service		Last 4 digits of ac	count number	\$951.00	\$951.0	<u> </u>	\$0.00
	,	zed Insolvency		When was the deb	ot incurred?		_		
	PO Box								
		lphia, PA 19101-734 reet City State Zlp Code	16	As of the date you	ı file, the claim is: Ch	eck all that apply			
		the debt? Check one.		☐ Contingent	, , , , , , , , , , , , , , , , , , , ,				
	Debtor 1 or	nly		☐ Unliquidated					
	Debtor 2 or	nly		☐ Disputed					
	Debtor 1 ar	nd Debtor 2 only		Type of PRIORITY	unsecured claim:				
	☐ At least one	e of the debtors and anothe	er	☐ Domestic suppo	ort obligations				
	☐ Check if th	nis claim is for a commu	nity debt	■ Taxes and certa	ain other debts you ow	e the government			
		ubject to offset?	-	☐ Claims for death	n or personal injury wh	nile you were intoxicated			
	No			☐ Other. Specify				_	
	☐ Yes				2014 Taxes				
Pa	rt 2: List All	of Your NONPRIORIT	Y Unsecure	ed Claims					
3.	Do any creditor	rs have nonpriority unse	cured claims	against you?					
	☐ No. You have	e nothing to report in this p	art. Submit th	is form to the court v	vith your other schedu	les.			
	Yes.								
4.	unsecured claim	n, list the creditor separately	y for each clai	m. For each claim lis	sted, identify what type	olds each claim. If a credit e of claim it is. Do not list clar ee nonpriority unsecured cl	aims already included	I in Part 1. If mo	

Total claim

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Debto	r1 Slifer, Amy R.	Case number (f know)	
4.1	Atlantic Credit and Finance Inc. Nonpriority Creditor's Name	Last 4 digits of account number 7627	\$9,930.26
	riemphony croaner or name	When was the debt incurred?	
	PO Box 12966 Roanoke, VA 24030-2966 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<u> </u>	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	
4.2	Capital One Bank USA NA	Last 4 digits of account number 2890	\$2,332.29
	Nonpriority Creditor's Name		
	PO Box 6492	When was the debt incurred?	
	Carol Stream, IL 60197-6492		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	
	Central Illinois Radiological		
4.3	Associates Nonpriority Creditor's Name	Last 4 digits of account number CIRA	\$49.97
	riemphony croaner or name	When was the debt incurred?	
	PO Box 3184		
	Indianapolis, IN 46206-3184 Number Street City State Zlp Code	As at the date was tile the plaint in Obsal all that each	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical	

Debto	Slifer, Amy R.	Case number (f know)				
4.4	Comenity Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$805.14			
	Bankruptcy Dept. PO Box 182125 Columbus, OH 43218-2125	When was the debt incurred?				
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	_				
	Debtor 1 only	Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans				
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Credit Card				
4.5	Effingham Surgery Center	Last 4 digits of account number	\$469.83			
	Nonpriority Creditor's Name c/o Account Resolution	When was the debt incurred?				
	Corporation PO Box 3860 Chesterfield, MO 63006-3860 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another	Student loans				
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Medical				
4.6	Greenville Regional Hospital Nonpriority Creditor's Name	Last 4 digits of account number 3667	\$343.08			
	Nonpholity Orealton's Name	When was the debt incurred?				
	200 Health Care Dr Greenville, IL 62246-1154					
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	_				
	Debtor 1 only	Contingent				
	Debtor 2 only	Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt	Student loans				
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	□Yes	■ Other Specify Medical				

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Debto	Slifer, Amy R.	Case number (f know)	
4.7	HSHS Holy Family Hospital Inc Nonpriority Creditor's Name	Last 4 digits of account number	\$343.08
	c/o Consumer Collection Mngmt Inc	When was the debt incurred?	
	PO Box 1839 Maryland Heights, MO 63043-6839 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.8	Kohls	Last 4 digits of account number 0234	\$3,261.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 2983	Then was the dest mounted.	
	Milwaukee, WI 53201-2983		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans	
	☐ Check if this claim is for a community debt	_	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	
4.9	Sarah Bush Lincoln Health Center	Last 4 digits of account number	\$1,204.15
	Nonpriority Creditor's Name		ψ1, <u>2</u> 01110
	DO D 2007	When was the debt incurred?	
	PO Box 3927 Springfield, IL 62708-3927		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	

Official Form 106 E/F

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Debto	Slifer, Amy R.	Case number (if know)	
4.10	Sarah Bush Lincoln Physician Billing	Last 4 digits of account number	\$175.33
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 3406		
	Springfield, IL 62708-3406 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.11	St Anthony's Memorial Hospital	Last 4 digits of account number	\$2,771.23
	Nonpriority Creditor's Name		* ,
	DO D. 1000	When was the debt incurred?	
	PO Box 4236 Carol Stream, IL 60197-4236		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.12	Synchrony Bank	Last 4 digits of account number 6290	\$812.00
	Nonpriority Creditor's Name	-	***************************************
	DO D	When was the debt incurred?	
	PO Box 960061 Orlando, FL 32896-0061		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Slifer, Amy R.	Case number (f know)					
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?					
Citibank NA	Line 4.1 of (Check one):	Part 1: Creditors with Priority Unsecured Claims				
Attn: Bankruptcy Dept. PO Box 6077		Part 2: Creditors with Nonpriority Unsecured Claims				
Sioux Falls, SD 57117-6077						
	Last 4 digits of account number	7627				
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?				
Midland Funding, LLC	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
8875 Aero Dr Ste 200 San Diego, CA 92123-2255		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Sall Diego, CA 92123-2233	Last 4 digits of account number	7627				
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?					
Midstate Collection Solutions, Inc.	Line 4.10 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims				
PO Box 3292		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Champaign, IL 61826-3292	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?				
Midstate Collection Solutions, Inc.	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
PO Box 3292 Champaign, IL 61826-3292		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Champaign, ic 01020-3292	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?				
State Collection Service Inc	Line 4.11 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims				
PO Box 6250 Madison, WI 53716-0250		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Wiadison, Wi 337 10-0230	Last 4 digits of account number					

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	951.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	951.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims from Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ \$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	22,497.36
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	22,497.36

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Fill in this information to identify your case:						
Debtor 1	Amy R. Slifer					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF ILLINOIS, EFFINGHAM DIVIS	SION		
Case number						
(if known)						

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code			e contract or lease	State what the contract or lease is for
2.1		Name, Number	, Street, City, State and ZIF	^o Code	
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2	Name				
	Number	Street			_
2.3	City		State	ZIP Code	_
2.3	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

Official Form 106G

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		J		· ·	
Fill in this	information to identify your	case:			
Debtor 1	Amy R. Slifer				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	SOUTHERN DISTRICT	OF ILLINOIS, EFFINGH	IAM DIVISION	
Case num (if known)	ber				☐ Check if this is an amended filing
Officia	l Form 106H				
Sched	lule H: Your Cod	ebtors			12/15
■ No □ Yes 2. With Califo		I lived in a community pr , New Mexico, Puerto Rico	operty state or territory , Texas, Washington, and	? (Community property s	states and territories include Arizona,
line 2	again as a codebtor only if the Schedule E/F (Official Form	nat person is a guarantor	or cosigner. Make sure	you have listed the cre	vith you. List the person shown in editor on Schedule D (Official Form e E/F, or Schedule G to fill out
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		Column 2: The cree Check all schedules	ditor to whom you owe the debt s that apply:
3.1	Name			_ ☐ Schedule D, line ☐ Schedule E/F, li ☐ Schedule G, line	ne
	Number Street City	State	ZIP Code		
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, li ☐ Schedule G, line	ne
•	Number Street City	State	ZIP Code	_	

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Fill	in this information to identify your ca	se:								
	otor 1 Amy R. Slife									
	otor 2 ouse, if filing)				_					
Uni	ted States Bankruptcy Court for the:	SOUTHERN DISTRIC	T OF ILLINOIS, EFFIN	GHAM	_					
1	se number lown)					Check if this is: An amende A suppleme	nt sh	owing p		chapter 13
0	fficial Form 106I					MM / DD/ Y	YYY	_		
S	chedule I: Your Inco	me								12/15
sup spo atta	plying correct information. If you a use. If you are separated and your ch a separate sheet to this form. O t1: Describe Employment	re married and not filing spouse is not filing with	g jointly, and your spo n you, do not include i	use is nforma	livir atior	ng with you, include about your spou	le inf se. If	ormati more	ion about yo space is nee	our eded,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or n	on-filir	ng spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed			☐ Employed ☐ Not employed				
	employers.	Occupation	Business System	s Ana	ılys	<u>t </u>				
	Include part-time, seasonal, or self-employed work.	Employer's name	Midland States B	ank						
	Occupation may include student or homemaker, if it applies.	Employer's address	1201 Network Ce Effingham, IL 624							
		How long employed th	ere? 8 years							
Par	t 2: Give Details About Mont	hly Income								
	mate monthly income as of the dat ss you are separated.	e you file this form. If yo	ou have nothing to repor	t for any	/ line	e, write \$0 in the spa	ice. I	nclude	your non-filin	g spouse
	u or your non-filing spouse have more ce, attach a separate sheet to this forn		ine the information for a	ll emplo	oyers	for that person on	the lir	nes belo	ow. If you ne	ed more
						For Debtor 1			or 2 or g spouse	
2.	List monthly gross wages, salary deductions). If not paid monthly, ca			2.	\$	4,473.19	\$_		N/A	
3.	Estimate and list monthly overting	ne pay.		3.	+\$	0.00	+\$		N/A	
4.	Calculate gross Income. Add line	2 + line 3.		4.	\$	4,473.19		\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	Debtor 1 Slifer, Amy R.		_	Cas	e number (if known)			
	Cop	y line 4 here	4.	Fo \$	4,473.19	For Debtor		
5.	-	all payroll deductions:		Ť-	4,470.10	<u> </u>	14/74	-
Э.	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.	\$_ \$_	1,090.63	\$	N/A N/A	_
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	-
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	_
	5e.	Insurance	5e.	\$	177.68	\$	N/A	-
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	_
	5g.	Union dues	5g.	\$_	0.00	\$	N/A	_
	5h.	Other deductions. Specify: Dental Insurance	5h.⊣	· -		+ \$	N/A	
		Dependent Life	_	\$_	1.76	\$	N/A	_
		Supplemental Life United Way	_	\$ \$	16.51 8.80	\$	N/A N/A	_
		Vision Insurance	_	\$-	4.07	\$	N/A	_
6	۸۵۵	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.		\$ \$	•	· · · · · · · · · · · · · · · · · · ·		-
6.			6.	· -	1,319.41	\$	N/A	-
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	3,153.78	\$	N/A	-
8.	8b. 8c. 8d. 8e.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security	8a. 8b. 8c. 8d. 8e.	\$	0.00 0.00 400.00 0.00	\$ \$ \$ \$	N/A N/A N/A	- - -
	8g. 8h.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8f. 8g. 8h1	\$_ \$_	0.00 0.00 0.00 43.33	\$ + \$	N/A N/A N/A	-
		, , , , , , , , , , , , , , , , , , , ,	011.7	- Ψ <u>-</u>	43.33	T —	N/A	<u>-</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	443.33	\$	N/A	<u>\</u>
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		3,597.11 + \$_	N/A	= \$ _	3,597.11
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule are contributions from an unmarried partner, members of your household, your dorn friends or relatives. In the contribution of th	epender				+ \$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain					\$	3,597.11
13.	Do	ou expect an increase or decrease within the year after you file this form	?				Combin	ned y income
		No.						

Fill	in this informatio	n to identify yo	ur case:					
						0.		
Deb	tor 1	Amy R. Slife	<u>r</u>				k if this is:	
	tor 2						An amended filing A supplement show expenses as of the	ing postpetition chapter 13
(0)	,					_	experience de el tille	
Unite	ed States Bankrup	tcy Court for the:		HERN DISTRICT OF ILLII BHAM DIVISION	NOIS,	_	MM / DD / YYYY	
	e number nown)							
Of	fficial Fori	m 106J						
Sc	chedule .	J: Your E	Expen	ses				12/15
info (if k	ormation. If mor known). Answer	e space is nee every questio	ded, attad n.	If two married people ar th another sheet to this				supplying correct ir name and case number
Part 1.	t 1: Describ	e Your Housel case?	nold					
	■ No. Go to lii		n a separa	ite household?				
	□ No □ Yes	. Debtor 2 mus	t file Offici	al Form 106J-2, <i>Expense</i> s	s for Separate Househ	oldof Debtor	2.	
2.	Do you have o	lependents?	□ No					
	Do not list Deb Debtor 2.	tor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state th	e						□ No
	dependents na	mes.			Son			■ Yes □ No
					son		8	■ Yes
					Daughter		18	□ No ■ Yes
								□ No
3.	Do your exper	nses include	_	No				☐ Yes
	expenses of p yourself and y	eople other the cour dependen	an $_{\square}$	Yes				
exp	imate your expe	e Your Ongoin enses as of you ate after the ba	ur bankru	y Expenses iptcy filing date unless y is filed. If this is a supp	you are using this for plemental Schedule J	m as a supp , check the	olement in a Chapt box at the top of th	er 13 case to report ne form and fill in the
valu		stance and hav		overnment assistance in the dition of the di			Your expe	enses
4.	The rental or I			ses for your residence.	Include first mortgage	4. \$		1,219.07
	If not included		J					
	4a. Real esta					4a. \$		0.00
		, homeowner's,	or renter's	insurance		4b. \$		0.00
	, ,			ıpkeep expenses		4c. \$		0.00
		ner's association				4d. \$		0.00
5.	Additional mo	rtgage payme	nts for yo	ur residence, such as ho	ome equity loans	5. \$		0.00

Debtor	1 Slifer, Amy R.	Case num	ber (if known)	
i. Ut	ilities:			
. 6a		6a.	\$	275.00
6b	•	6b.	\$	60.00
6c		6c.	\$	445.00
6d		6d.	\$	0.00
Fo	ood and housekeeping supplies	7.	·	550.00
	nildcare and children's education costs	8.	\$	0.00
	othing, laundry, and dry cleaning	9.	\$	75.00
	ersonal care products and services	10.		100.00
	edical and dental expenses	11.		125.00
	ansportation. Include gas, maintenance, bus or train fare.		Ψ	125.00
	o not include car payments.	12.	\$	75.00
	ntertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
	naritable contributions and religious donations	14.		0.00
	surance.		<u> </u>	0.00
	o not include insurance deducted from your pay or included in lines 4 or 20.			
	ia. Life insurance	15a.	\$	0.00
15	b. Health insurance	15b.	\$	0.00
	ic. Vehicle insurance	15c.	·	0.00
	id. Other insurance. Specify:	15d.		0.00
	exes. Do not include taxes deducted from your pay or included in lines 4 or 20.			0.00
	Decify:	16.	\$	0.00
	stallment or lease payments:		Ť	0.00
	'a. Car payments for Vehicle 1	17a.	\$	354.00
	b. Car payments for Vehicle 2	17b.	·	0.00
	c. Other. Specify:	17c.		0.00
	'd. Other. Specify:	17d.	·	0.00
	our payments of alimony, maintenance, and support that you did not report as		<u> </u>	0.00
	educted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
	ther payments you make to support others who do not live with you.		\$	0.00
	pecify:	19.	· -	
	ther real property expenses not included in lines 4 or 5 of this form or on Sche	edule I: You	r Income.	
20	a. Mortgages on other property	20a.		0.00
	b. Real estate taxes	20b.	\$	0.00
20	c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	od. Maintenance, repair, and upkeep expenses	20d.		0.00
	De. Homeowner's association or condominium dues	20e.		0.00
	ther: Specify: License plates	21.	·	9.00
_			+\$	
_	et care		+\$	50.00
50	chool lunches		- φ	20.00
. Ca	alculate your monthly expenses			
22	2a. Add lines 4 through 21.		\$	3,457.07
22	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	·
	2c. Add line 22a and 22b. The result is your monthly expenses.		\$	3,457.07
				5,751.01
	alculate your monthly net income.			
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.		3,597.11
23	b. Copy your monthly expenses from line 22c above.	23b.	-\$	3,457.07
	sc. Subtract your monthly expenses from your monthly income.	00-	e	140.04
23	The result is your <i>monthly net income</i> .	23c.	\$	140.04
23	·			
. D o	by you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect you diffication to the terms of your mortgage?			se or decrease because of a
. Do	r example, do you expect to finish paying for your car loan within the year or do you expect yo			se or decrease because of a

	mation to identify your				
Debtor 1	Amy R. Slifer]
211 0	First Name	Middle Name	Last Name		
Debtor 2 Spouse if, filing)	First Name	Middle Name	Last Name		
Jnited States Ba	ankruptcy Court for the:	SOUTHERN DISTRIC	CT OF ILLINOIS, EFFINGH	AM DIVISION	
Case number					
f known)					☐ Check if this is an amended filing
two married po			al Debtor's So		12/
otaining money	y or property by fraud ir	n connection with a bar			ement, concealing property, or 00, or imprisonment for up to 20
otaining mone ears, or both. 1 Sig	y or property by fraud ir 8 U.S.C. §§ 152, 1341, 19 In Below	n connection with a bar 519, and 3571.	nkruptcy case can result in	fines up to \$250,00	
otaining mone ears, or both. 1 Sig	y or property by fraud ir 8 U.S.C. §§ 152, 1341, 19 In Below	n connection with a bar 519, and 3571.		fines up to \$250,00	
otaining mone ears, or both. 1 Sig	y or property by fraud ir 8 U.S.C. §§ 152, 1341, 19 In Below	n connection with a bar 519, and 3571.	nkruptcy case can result in	fines up to \$250,00	
btaining money ears, or both. 1 Sig Did you pa	y or property by fraud ir 8 U.S.C. §§ 152, 1341, 19 In Below	n connection with a bar 519, and 3571.	nkruptcy case can result in	ankruptcy forms?	
Did you pa	y or property by fraud in 8 U.S.C. §§ 152, 1341, 19 in Below ay or agree to pay some	n connection with a bar 519, and 3571. one who is NOT an atto	nkruptcy case can result in	ankruptcy forms? Attach Ba	20, or imprisonment for up to 20 ankruptcy Petition Preparer's Notice on, and Signature (Official Form 119
Did you pa No Yes. Under penathat they ar	y or property by fraud in 8 U.S.C. §§ 152, 1341, 15 in Below ay or agree to pay some Name of person alty of perjury, I declare to the true and correct.	n connection with a bar 519, and 3571. one who is NOT an atto	nkruptcy case can result in	ankruptcy forms? Attach Ba	20, or imprisonment for up to 20 ankruptcy Petition Preparer's Notice on, and Signature (Official Form 119
Did you pa No Yes. Under penathat they ar X /s/ Am Amy F	y or property by fraud in 8 U.S.C. §§ 152, 1341, 19 In Below ay or agree to pay some Name of person	n connection with a bar 519, and 3571. one who is NOT an atto	orney to help you fill out ba	ankruptcy forms? Attach Ba Declaration	20, or imprisonment for up to 20 ankruptcy Petition Preparer's Notice on, and Signature (Official Form 119

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	Case 10-00475-ikg DOC 1 Filed 12/02/10 Fage 40 01 34	+	
Fill	in this information to identify your case:		
Del	otor 1 Amy R. Slifer		
	First Name Middle Name Last Name		
	tor 2 use if, filing) First Name Middle Name Last Name		
Uni	ted States Bankruptcy Court for the: SOUTHERN DISTRICT OF ILLINOIS, EFFINGHAM DIVISION		
	se number		
(if kn	lown)	_	ck if this is an nded filing
<u>Of</u>	ficial Form 106Sum		
	mmary of Your Assets and Liabilities and Certain Statistical Information		12/15
	is complete and accurate as possible. If two married people are filing together, both are equally responsible for rmation. Fill out all of your schedules first; then complete the information on this form. If you are filing amende		
you	r original forms, you must fill out a new Summary and check the box at the top of this page.		•
Par	t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	165,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	15,857.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	180,857.00
Par	t 2: Summarize Your Liabilities		
		Vaur	liabilitiaa
			liabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	166,093.49
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F	\$	951.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j &*Chedule E/F	\$	22,497.36
	Your total liabilities	\$	189,541.85
Do	Summarina Vanalas and Funance		
Par	•		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	3,597.11
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,457.07
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your or	other sched	lules.
7	Yes What kind of daht do you have?		
7.	What kind of debt do you have?		

court with your other schedules.

Official Form 106Sum Summary of

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the

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Debtor 1 Slifer, Amy R. Case number (if known)

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$______\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	951.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	951.00

Fil	l in this inforn	nation to identify you	case:					
De	btor 1	Amy R. Slifer						
_	h.t O	First Name	Middle Name	Last Name				
-	btor 2 ouse if, filing)	First Name	Middle Name	Last Name				
Un	ited States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT (OF ILLINOIS, EFFINGHAM D	IVISION			
	se number _							
(if k	nown)				_	heck if this is an mended filing		
○ ¹	ficial Ea	r. 107						
	fficial Fo		Affairs for Individ	luals Filing for R	ankruntov	4/16		
					qually responsible for supply additional pages, write your r			
(if k	nown). Answ	er every question.						
Pa	rt 1: Give [Details About Your Ma	rital Status and Where You	Lived Before				
1.	What is you	r current marital statu	s?					
	☐ Married							
	■ Not man	rried						
2.	During the la	uring the last 3 years, have you lived anywhere other than where you live now?						
	■ No	■ No						
		t all of the places you liv	ved in the last 3 years. Do not i	nclude where you live now.				
		ior Address:	Dates Debtor 1		dress:	Dates Debtor 2		
			there			lived there		
3. stat					y property state or territory? o, Texas, Washington and Wis			
	■ No							
	_	ake sure you fill out <i>Sch</i>	edule H: Your Codebtors (Offic	cial Form 106H).				
Pa	rt 2 Explai	in the Sources of You	rincome					
4.	Fill in the tota	al amount of income yo	nployment or from operating u received from all jobs and a lave income that you receive to	II businesses, including part-		ar years?		
	□ No							
		I in the details.						
			Debter 4		Dobton 2			
			Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income		
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)		
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$45,059.32	☐ Wages, commissions, bonuses, tips			
			☐ Operating a business		☐ Operating a business			

Official Form 107

De	btor 1 S	ifer, Amy	R.		Cas	e number (if known)		
				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)
Fo (Ja	r last caler anuary 1 to	ndar year: December :	31, 2015)	■ Wages, commissions, bonuses, tips	\$54,178.00	☐ Wages, comr bonuses, tips	nissions,	
				☐ Operating a business		☐ Operating a b	ousiness	
		dar year bef December 3		■ Wages, commissions, bonuses, tips	\$46,787.00	☐ Wages, commonute bonuses, tips	nissions,	
				☐ Operating a business		Operating a b	ousiness	
	other pub you are fil List each	ic benefit pay ing a joint cas	ments; pensi se and you ha ne gross incol	er that income is taxable. Examons; rental income; interest; diversity income that you received too me from each source separately Debtor 1	vidends; money collected from gether, list it only once under	n lawsuits; royalties; Debtor 1.		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco	me	Gross income (before deductions and exclusions)
Ра 6.		r Debtor 1's Neither De	or Debtor 2'	Made Before You Filed for E s debts primarily consumer lebtor 2 has primarily consul personal, family, or household	debts? mer debts. Consumer debts	are defined in 11 U.	S.C. § 101(8	8) as "incurred by an
		□ No. □ Yes	Go to line 7 List below 6 creditor. Do payments to	re you filed for bankruptcy, did you filed for bankruptcy, did back creditor to whom you paid to not include payments for don to an attorney for this bankruptcy on 4/01/19 and every 3 years a	a total of \$6,425* or more in onestic support obligations, surple y case.	one or more paymen uch as child support	and alimon	
	■ Yes.			r both have primarily consulted you filed for bankruptcy, did		\$600 or more?		
		■ No.	Go to line 7	7 .				
		□ _{Yes}		each creditor to whom you paid or domestic support obligations otcy case.				
	Creditor	's Name and	l Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this p	payment for
7.	<i>Insiders</i> in which you	nclude your re are an office	elatives; any g r, director, pe	bankruptcy, did you make a eneral partners; relatives of any erson in control, or owner of 209 rietor. 11 U.S.C. § 101. Include	payment on a debt you ow y general partners; partnershi % or more of their voting secu	red anyone who wa ps of which you are rities; and any mana	a general pa aging agent,	artner; corporations of including one for a
	■ No □ Yes.	List all pavm	ents to an ins	ider.				
		Name and		Dates of payme	nt Total amount	Amount you still owe	Reason fo	or this payment

Official Form 107

Der	DIOI I SIITER, AMY R.		Cas	e number (if known)			
8.	Within 1 year before you filed for bankrupto	y, did you make any pay	ments or transfer an	ny property on ac	count of a deb	t that benefited an	
	<pre>insider? Include payments on debts guaranteed or cosig</pre>	ned by an insider.					
	■ No						
	Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for	this payment	
			paid	Still Owe	include cred	noi s riame	
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures					
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury of and contract disputes.						
	■ No						
	Yes. Fill in the details.	Noture of the case	Court or aganay		Status of the		
	Case title Case number	Nature of the case	Court or agency		Status of the	e case	
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		erty repossessed, fo	reclosed, garnish	ed, attached, s	seized, or levied?	
	■ No. Go to line 11. □ Yes. Fill in the information below.						
	Creditor Name and Address	Describe the Property		Date		Value of the	
		Explain what happene	d			property	
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca No Yes. Fill in the details.		luding a bank or fina	ncial institution,	set off any am	ounts from your	
	Creditor Name and Address	Describe the action the	e creditor took	Date taken	action was	Amoun	
12.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?						
	No						
	☐ Yes						
Par	t 5: List Certain Gifts and Contributions						
13.	Within 2 years before you filed for bankrup	cy, did you give any gift	s with a total value o	of more than \$600	per person?		
	No No						
	Yes. Fill in the details for each gift.						
	Gifts with a total value of more than \$600 person	per Describe the gifts	S	Dates the g	s you gave ifts	Value	
	Person to Whom You Gave the Gift and Address:						
14.	Within 2 years before you filed for bankrupt	cy, did you give any gift	s or contributions w	ith a total value o	f more than \$6	600 to any charity?	
	No						
	Yes. Fill in the details for each gift or contr						
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Il Describe what yo	u contributed	Dates	s you ibuted	Value	
Par	t 6: List Certain Losses						

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

Del	otor 1 Slifer, Amy R.		Case number (if known)				
	or gambling?						
	■ No □ Yes. Fill in the details.						
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the loe the amount that insurance has paid. Lace claims on line 33 of Schedule A/B: F	ist pending	Date of your loss	Value of property lost	
Par	t 7: List Certain Payments or Transfers	S					
16.	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petition pre	oreparin	g a bankruptcy petition?			y to anyone you	
	□ No ■ Yes. Fill in the details.						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	ou ·	Description and value of any proper transferred	erty	Date payment or transfer was made	Amount of payment	
	Orr Law, LLC 215 N 4th St Effingham, IL 62401-3461		Filing Fee \$335 Attorney Fee \$800		10/24/16	\$1,135.00	
17.	Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that your No Yes. Fill in the details.	litors or	to make payments to your creditors		r transfer any propert	y to anyone who	
	Person Who Was Paid Address		Description and value of any proper transferred	erty	Date payment or transfer was made	Amount of payment	
18.	Within 2 years before you filed for bankru transferred in the ordinary course of you include both outright transfers and transfers gifts and transfers that you have already liste. No Yes. Fill in the details.	ir busine made as	ess or financial affairs? security (such as the granting of a secu				
	Person Who Received Transfer Address		Description and value of property transferred		any property or s received or debts xchange	Date transfer was made	
	Person's relationship to you				-		
19.	beneficiary? (These are often called asset-) No			lf-settled tru	ist or similar device of	which you are a	
	Yes. Fill in the details. Name of trust		Description and value of the prope	rty transfor	red	Date Transfer was	
	name of trust		besomption and value of the prope	ity transien	Gu	made	

Del	btor 1 Slifer, Amy R.			Case number (if known)					
Pai	rt 8: List of Certain Financial Accounts, Ins	truments, Safe Deposit	Boxes, and Storag	ge Units					
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.								
	No	iations, and other infant	nai montations.						
	☐ Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accoun instrument	t or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer				
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed for	bankruptcy, any s	safe deposit box or other deposito	ory for securities,				
	■ No								
	☐ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S and ZIP Code)		Describe the contents	Do you still have it?				
22.	Have you stored property in a storage unit o	r place other than your	home within 1 yea	ar before you filed for bankruptcy	?				
	■ No								
	☐ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S and ZIP Code)		Describe the contents	Do you still have it?				
Pai	rt 9: Identify Property You Hold or Control	for Someone Else							
23.			de any property y	ou borrowed from, are storing fo	r, or hold in trust for				
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the property	Value				
Pai	rt 10: Give Details About Environmental Info	ormation							
	the purpose of Part 10, the following definition								
	Environmental law means any federal, state, toxic substances, wastes, or material into the controlling the cleanup of these substances,	e air, land, soil, surface	•	• •					
	Site means any location, facility, or property own, operate, or utilize it, including disposal		nvironmental law,	whether you now own, operate, o	or utilize it or used to				
	Hazardous material means anything an envir material, pollutant, contaminant, or similar to		s a hazardous wa	ste, hazardous substance, toxic s	ubstance, hazardous				
Rep	port all notices, releases, and proceedings that	t you know about, regar	dless of when the	y occurred.					
24.	Has any governmental unit notified you that	you may be liable or po	tentially liable un	der or in violation of an environm	ental law?				
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental un Address (Number, S		Environmental law, if you know it	Date of notice				

Del	otor 1	Slifer, Amy R.		Case number (if known)					
25.	Hav	e you notified any governmental unit of	any release of hazardous material?						
		No							
		Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental la know it	w, if you Date of not	tice			
26.	Hav	re you been a party in any judicial or adn	ministrative proceeding under any enviro	nmental law? Include	settlements and orders.				
		No							
		Yes. Fill in the details.							
		se Title se Number	Court or agency Name Address (Number, Street, City, State	Nature of the case	Status of to	he			
			and ZIP Code)						
Pai	t 11:	Give Details About Your Business or	Connections to Any Business						
27.	Wit	hin 4 years before you filed for bankrupt	cy, did you own a business or have any	of the following conn	ections to any business?				
		☐ A sole proprietor or self-employed i	n a trade, profession, or other activity, ei	ther full-time or part-	time				
		☐ A member of a limited liability comp	pany (LLC) or limited liability partnership	(LLP)					
		☐ A partner in a partnership							
		☐ An officer, director, or managing executive of a corporation							
		☐ An owner of at least 5% of the voting or equity securities of a corporation							
		No. None of the above applies. Go to Part 12.							
		siness Name	Describe the nature of the business	Employer Identification number					
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Social Security number or ITI	N.			
	•	, ,	Name of accountant of bookkeeper	Dates business	existed				
28.		hin 2 years before you filed for bankrupt itutions, creditors, or other parties.	ccy, did you give a financial statement to	anyone about your b	usiness? Include all financia	I			
		No							
		Yes. Fill in the details below.							
		me dress	Date Issued						
		mber, Street, City, State and ZIP Code)							
Pai	t 12:	Sign Below							
rue ban	and krup	correct. I understand that making a false	ancial Affairs and any attachments, and less statement, concealing property, or obta 00, or imprisonment for up to 20 years, or	aining money or prop					
		y R. Slifer . Slifer	Signature of Debtor 2						
	-	re of Debtor 1	digitation of bostor 2						
Dat	e _	December 2, 2016	Date						
_	-	attach additional pages to Your Stateme	ent of Financial Affairs for Individuals Fili	ng for Bankruptcy (O l	fficial Form 107)?				
■ N □ Y									
Did ■ N	-	pay or agree to pay someone who is not	an attorney to help you fill out bankrupt	cy forms?					
_		Name of Person Attach the Bankru	ptcy Petition Preparer's Notice, Declaration,	and Signature (Official	Form 119).				
Offic	ial Fo	rm 107 Staten	nent of Financial Affairs for Individuals Filing	for Bankruptcy		page 6			

Fill in this info	ormation to identify your case:		Check or	ne box only as d	irected in this form and	l in Form
Debtor 1	Amy R. Slifer		122A-1S			
Debtor 2			1 1 -	There is no pres	umption of abuse	
(Spouse, if filing)				•	•	
United States	Southern District Division	of Illinois, Effingham	<u> </u>	applies will be n	o determine if a presur nade under <i>Chapter 7 N</i> cial Form 122A-2).	•
Case numbe (if known)	r		1		does not apply now becout it could apply later.	ause of qualified
			□ Cł	neck if this is a	n amended filing	
Official	Form 122A - 1					
Chapte	r 7 Statement of Your Cu	rrent Monthly	Incom	е		12/1
a separate she number (if kno military service	e and accurate as possible. If two married people to this form. Include the line number to which town). If you believe that you are exempted from a pe, complete and file Statement of Exemption from Calculate Your Current Monthly Income	the additional information appresumption of abuse becau	oplies. On the use you do no	top of any addit ot have primarily	ional pages, write your i consumer debts or beca	name and case ause of qualifying
1. What is	s your marital and filing status? Check one or	nly.				
■ Not	married. Fill out Column A, lines 2-11.					
☐ Marı	r <mark>ied and your spouse is filing with you.</mark> Fill o	ut both Columns A and B,	lines 2-11.			
□ Marı	ried and your spouse is NOT filing with you.	You and your spouse ar	e:			
_	ving in the same household and are not lega	• •				
р	ving separately or are legally separated. Fill enalty of perjury that you and your spouse are le part for reasons that do not include evading the	gally separated under nonb	ankruptcy la	w that applies or		
101(10A). F 6 months, a	average monthly income that you received from all for example, if you are filing on September 15, the 6-radd the income for all 6 months and divide the total by the rental property, put the income from that property	month period would be March 6. Fill in the result. Do not inc	1 through Aug clude any inco	gust 31. If the amo	unt of your monthly incom	ne varied during the
			Colu Debt	mn A or 1	Column B Debtor 2 or non-filing spouse	
	ross wages, salary, tips, bonuses, overtime, deductions).	and commissions (before	e all \$	4,129.10	\$	
	y and maintenance payments. Do not include B is filled in.	payments from a spouse	if \$	400.00	\$	
of you of from an roomma	ounts from any source which are regularly pa or your dependents, including child support unmarried partner, members of your household ates. Include regular contributions from a spous include payments you listed on line 3	 Include regular contributi your dependents, parents, 	ons and	0.00	\$	
5. Net inc	ome from operating a business, profession,					
	eceipts (before all deductions) y and necessary operating expenses	\$ 0.00 -\$ 0.00				
	nthly income from a business, profession, or fa	0.00	ere -> \$	0.00	\$	
	ome from rental and other real property				·	
		Debtor 1				
Gross re	eceipts (before all deductions)	\$ 0.00				
	y and necessary operating expenses	-\$ 0.00	•	0.00	•	
Net mor	nthly income from rental or other real property	\$0.00 Copy h		0.00	\$	
7. Interest	t, dividends, and royalties		\$	0.00	Ψ	

Official Form 122A-1

Debto	Slifer, Amy R.			Case number	er (if known)			
				Column A Debtor 1		Column B Debtor 2 or non-filing sp	oouse	
8.	Unemployment compensation			\$	0.00	\$		
	Do not enter the amount if you contend that the amount r Social Security Act. Instead, list it here:	eceived was a benefit u	nder the					
	For your spouse	0.	00					
	. o. you. opouco	·						
	Pension or retirement income. Do not include any amounder the Social Security Act.			\$	0.00	\$		
10.	Income from all other sources not listed above. Spe not include any benefits received under the Social Securia victim of a war crime, a crime against humanity, or intel If necessary, list other sources on a separate page and p	ity Act or payments rece rnational or domestic te	eived as					
	·			\$	0.00	\$		
				\$	0.00	\$		
	Total amounts from separate pages, if any.		+	\$	0.00	\$		
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the to		\$	4,529.10	+ \$		= \$	4,529.10
Part	2: Determine Whether the Means Test Applies to	o You					incom	
12.	Calculate your current monthly income for the year.	Follow these steps:						
	12a. Copy your total current monthly income from line	11		Сор	y line 11 h	ere=>	\$	4,529.10
	Multiply by 12 (the number of months in a year)						x	
	12b. The result is your annual income for this part of the	form				12b.	\$	54,349.20
12	Calculate the median family income that applies to y	(A) Follow these stens					L	
13.	, , , ,	i i	•					
	Fill in the state in which you live.	IL						
	Fill in the number of people in your household.	4						
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go form. This list may also be available at the bankruptcy of	online using the link sp	ecified ir	n the separa	te instructi	13. ons for this	\$	86,921.00
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1, ch	eck box	1T,here is no	presumptic	on of abuse.		
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 21,	The presu	ımption of al	ouse is dete	ermined by For	m 122A	-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury the	hat the information on th	nis staten	nent and in a	ny attachm	ents is true an	d correc	t.
	X /s/ Amy R. Slifer Amy R. Slifer							
	Signature of Debtor 1 Date December 2, 2016							
	MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file Forn	n 122A-2.						
	If you checked line 14b, fill out Form 122A-2 and f	ile it with this form.						

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation		
\$245	filing fee	_	
\$75	administrative fee		
+ \$15	trustee surcharge		
\$335	total fee		

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Illinois, Effingham Division

In r	re Slifer, Amy R.		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENS	SATION OF ATT	ORNEY FOR	DEBTOR	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of or	f the petition in bankrupto	cy, or agreed to be pa	id to me, for services	hat rendered or to
	For legal services, I have agreed to accept		\$	800.00	
	Prior to the filing of this statement I have received		\$	800.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compensatirm.	ation with any other perso	on unless they are me	embers and associates	of my law
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names				y law firm. A
5.	In return for the above-disclosed fee, I have agreed to render	r legal service for all aspe	ects of the bankruptc	y case, including:	
	a. Analysis of the debtor's financial situation, and renderingb. Preparation and filing of any petition, schedules, statemetc. Representation of the debtor at the meeting of creditors atd. [Other provisions as needed]	nt of affairs and plan whi	ch may be required;	-	nkruptcy;
6.	By agreement with the debtor(s), the above-disclosed fee door	es not include the following	ing service:		
	Cl	ERTIFICATION			
this	I certify that the foregoing is a complete statement of any ag bankruptcy proceeding.	reement or arrangement f	for payment to me fo	r representation of the	e debtor(s) in
_1	December 2, 2016	/s/ Roy Dent			
j	Date	Roy Dent Signature of Attorn Orr Law, LLC	ney		
		215 N 4th St Effingham, IL 62	2401-3461		
		roy.jackson.den Name of law firm	t@gmail.com		